

**Ashburn Youth Football League- 2002**  
**APPLICATION FOR HEAD COACH**

Name \_\_\_\_\_

Address: \_\_\_\_\_

Telephone # (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Email Address: \_\_\_\_\_

Place of Employment \_\_\_\_\_ Occupation \_\_\_\_\_

Please answer the following questions completely. Attach additional sheets as necessary and return by fax to 703-858-5668.

1. Do you have a child/children registering to play in AYFL? Yes \_\_\_\_ No \_\_\_\_

2. Position applying for: Coach \_\_\_\_ Assistant Coach \_\_\_\_

Cheerleading Coach \_\_\_\_ Assistant Cheerleading Coach \_\_\_\_

3. What age level(s) are you requesting to coach?

A League (12-14yrs) \_\_\_\_

B League (10-11 yrs) \_\_\_\_

C League (7-9 yrs) \_\_\_\_

Flag (5-7 yrs) \_\_\_\_

4. If applying as an assistant with a particular coach, please designate that coach:

\_\_\_\_\_

5. List all of your coaching experience, including the type of sport, age level, dates and city or town where you coached.

6. List any coaching certifications and/or training courses, which you have received or attended. Please include dates.

7. List any other activities in which you have been involved that are related to working with children. Be specific.

8. Have you ever been convicted of a felony or any crime involving violence or abuse? If yes, provide details.

I acknowledge that I am over the age of 18. I will, to the best of my ability, support the Ashburn Youth Football League and abide by all rules and regulations as set forth in the AYFL by-laws.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**For AYFL use only**

Date Received \_\_\_\_\_

Division \_\_\_\_\_

Approved Date \_\_\_\_\_

Team \_\_\_\_\_